

1896. We then stated, after having verified the information by careful inquiry, that the men of the Medical Staff Corps act "as cooks, gardeners, clerks, window-cleaners, floor scrubbers, storekeepers, servants to the medical officers, mess waiters, anything and everything, in short, and, finally, occasionally as nurses. As if this were not enough, the orderly nurse may be ordered out of the ward by the non-commissioned officer on duty, to go on drill, or on parade, or to do coaling, and it is no uncommon occurrence for the Nursing Sister to come on duty in the morning and find her patients, in bed, perhaps, but her nurses out on the parade ground."

A correspondent in the *Broad Arrow*, at the end of last year, also drew attention to the inefficient training, if training it can be called, of the orderly. He said: "We cram him through a six-months course of drill, first-aid, and nursing, and then present him to the Army as the finished article. Should a man display any special skill in managing his multifarious duties he reaps no advantage therefrom. By passing an examination in the theory of nursing, etc., he may become a non-commissioned officer, but from that day he ceases to perform nursing duty. It is thought to be incompatible with his position, though it is not so in the case of the officer or Sister."

We may add that the practical instruction in nursing received by these orderlies is *one month's* daily instruction of half an hour by a nursing Sister!

It cannot therefore be conceded that these men are in any way "trained nurses," and we should be glad to see that Captain Norton had asked yet another question of the Under-Secretary of State for War, namely, his definition of a "trained nurse." It is high time this point received the public attention it deserves. Meanwhile, we think it is obvious that the nursing arrangements for the sick and wounded of the Soudan were inadequate in the extreme.

SPLENDID ISOLATION.

Now that the question of specialism in nursing is assuming a serious aspect, it is interesting to notice that the medical profession, both in this country and in the United States, are recognizing and combating this evil with regard to medicine. An interesting article appeared in last week's *Lancet* on the dangers of specialism, in which the following points were insisted upon: That the work of the

medical profession cannot be broken up into bits as though the body were not one and indivisible, or as if one portion of it could suffer in a splendid isolation from the rest, that consequently local diseases are treated without reference to the general constitution of the patient, and the belief of the public—whose notions have been fed by ages of ignorance and quackery, in an ever increasing specialization in therapeutics, is one of the strongest reasons for suspecting the truth of the whole doctrine and all the pretensions on which it thrives. Dr. Bulkley, the President of the American Academy of Medicine, delivered last year, in this capacity, an address on the same subject. He admits that specialization has its legitimate place, but asserts that it is often cultivated and practised in a way which brings it and the whole science and art of medicine into discredit. Young men are tempted to take up special work without laying the foundation in deep and general knowledge of medicine, desiring to find short cuts to success and wealth by blazing out into sudden fame as specialists without any adequate general study of medicine in all its departments. The remedy he suggests is the more complete general education of the specialist, and the more thorough study of the whole range of medical knowledge as a basis for special practice. The more a specialist isolates himself, and claims a right to act independently of the judgment of his fellow-practitioners, the more, Dr. Bulkley holds, he is to be regarded with distrust by the profession and the public alike. We quote these expressions of medical opinion concerning the organization of the Medical profession at some length because they coincide entirely with those which we have always maintained with regard to the kindred profession of nursing. The education of nurses as specialists "as though one portion of the body could suffer in splendid isolation from the rest," is an evil to which we have constantly drawn attention. The danger is at the present time an increasing one; as the Royal British Nurses' Association has this year intimated its intention—through an article from the pen of Sir Dyce Duckworth in the *Nurses' Journal*—of proceeding to place on its roll of trained nurses, asylum attendants who have had no training in a general hospital.

This disastrous measure, if carried out, will, we have no hesitation in saying, have the effect of abolishing the Register of Trained Nurses, and of substituting for it a Roll of Specialists.

[previous page](#)

[next page](#)